

CONSTRUCTION OF ‘GOOD’ AND ‘BAD’ MOTHERHOOD DURING THE STUDY OF CRITICAL REFLECTION ON EXPERIENCES OF SOCIAL WORK WITH FAMILIES AT SOCIAL RISK

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The article presents the analysis of a case study which is a part to a more extensive study carried out under participatory action research methodology. The aim of the article is to reveal how positioning of “risk family” woman through conversation with social worker and mother about social work process with family deploys different categories of motherhood and social worker’s positions.

PHENOMENON OF FAMILIES AT “SOCIAL RISK” IN LITHUANIA

Social work practice and social services are becoming an increasingly significant object of scientific research. According to Žalimienė

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(2006), there are researchers in the Western Europe and the U.S. who focus specifically on studying social welfare, while in Lithuania, this field has remained practically unstudied and unanalyzed. Only few scientific studies in Lithuania focus particularly on the analysis of experiences of social work with families at social risk. Meanwhile, foreign authors provide a lot of extensive conceptualized information about experiences of participants of processes of social work with families at social risk. As the number of families facing poverty is probably going to increase due to economic recession, activity of social workers for work with families at social risk is going to keep its relevance (Motiečienė, 2010).

Families receive aid through social services, either basic or special, all sharing the same notion of social service. The aim of social services is “to ensure conditions for a person (a family) to develop or improve abilities and capabilities necessary to solve existing social problems without any additional aid, maintain social relations with the society, and help overcome social exclusion” (Žin., 2006, No. 17-589, Article 3, part 2). Municipalities are the organizers of social services, while the actual need for social services is assessed by social workers (Motiečienė, 2010).

Lithuanian legal acts define a family at social risk as a family raising children under 18 with at least one of the parents having an alcohol, drug or psychotropic substance abuse problem, gambling addiction, lack of certain social skills to know how to or to be able to take proper care of children, who uses psychological, physical, sexual violence against his/her children, spends children monetary support for other than the family’s interests, thus posing danger to the children’s physical, mental, spiritual, moral development and safety (Žin., No. 17-589, 2006, Article 2, part 7).

Data by the Department of Statistics suggest that there were 10904 families at social risk raising 23335 children in total in Lithuania in 2010. The most common reasons why families at social risk are added into this statistics are alcohol addiction and lack of social skills. Fewer families are added into the statistics for inadequate usage of monetary support and permanent child custody (Socialinis pranešimas (Social

report), 2010-2011). 630 social workers worked with families at social risk in Lithuania in 2009 (Socialinis pranešimas (Social report), 2009). The mentioned statistical data show how relevant and important it is to study this field in order to ensure more effective results of social services for families at social risk.

By applying the concept of social tension fields, Kondrotaitė (2006) analyzes the situation of families at social risk that unfolds through negative factors of social risk: poverty, unemployment, limited potential to participate in the labour market, alcohol abuse, crime, child neglect, prolonged dependence on social support etc. The author suggests that in Lithuania, families at social risk become a negative social phenomenon that tends to be considered on the national level by focusing on a seemingly sole solution – monetary social support. As the country has been struggling against economic crisis in the recent year, monetary support has drawn criticism, while the role of social workers for work with families at social risk has been emphasized more (Motiečienė, 2010).

In Lithuania, the term family at “social risk” is associated with the term “multiproblem” family used in the literature on social work and in social work practice. The term of multiproblem family implies that the family has more than one problem. These problems are both internal and external. Internal problems of a family include conflict relations, confused roles and lack of positive interaction between family members. External problems are related to unequal distribution of resources in the society and imperfections of economy, education, health and other domains. Such a family may not be aware of available services or has had negative experience in seeking for or using them. A multiproblem family is even considered to have developed a certain survival instinct to avoid contacts with organizations providing social services, and will ask for help only when they have faced actual crisis (Kaplan, 1986).

Kaplan (1986) reveals such family’s attitude towards social workers providing social services and argues that social service providers can sometimes deepen family crises if the services are uncoordinated or aimed exceptionally at one member of the family. Such families

tend to have internal anger being unable to solve problems on their own. Such anger may be transferred on social workers as a defence reaction. In such a situation, social workers or a whole team working with the family must understand the aim of social services they are supposed to provide and attempt to build trustful relations with the recipient of social services, i.e. the family. Johnson (1998) defines social work with families at social risk as provision of constructive social and psychological aid to a family with the aim to empower it and cultivate in it and help maintain the skills necessary for social functioning.

Kaplan (1986) considers it to be natural that internal crisis appears in the family as soon as social workers become involved. Analysis of social workers' attitude towards families at social risk implies dealing with such concepts as stubborn, hardly susceptible to change, inadequate, distrusting, unmotivated, hopeless and difficult, i.e. not able to establish contact. At this point, it is important that social workers who provide social services and the family share mutual wish for change and establish positive relations with social organizations of the community. Social risk families often tend to have negative expectations about the social service system. The feeling that certain decision making powers seek to limit individuality of a person or a family makes them resist the existing system (Motiečienė, Naujanienė, 2011).

CRITICAL AND CONSTRUCTIONAL PARADIGMS IN SOCIAL WORK

The aim of contemporary social work practice is adequate response of social workers to the rights and needs of recipients of social services. Such approach was expressed by critical theory supported by theorists of social work in 1960 to 1970. Critical theory spoke widely about "discourse of opportunities" that is constructed from natural social experience. Fook (2003) emphasises that social workers who follow this perspective are interested in systemic development of social work practice by identifying various forms of knowledge and various ways of creation of social work knowledge. In Lithuania,

however, critical theory of social work is viewed in a rather limited way. Analysis described in this article is based on one of the models of social work based on the critical paradigm – the structural social work practice model. Advocates of this model aim to answer the question “how wealth and power in the society construct and define the weaker ones?” (Healy, 2005, 24; according to Martin, 2003).

A social worker with critical way of thinking aims at increasing his/her clients’ consciousness, helps them identify the causes of their problems related to inadequate social structures rather than clients’ personalities (Healy, 2005). Personal problems are seen as consequences of daily structural problems: poverty, unemployment, insecure environment etc. Practitioners of social work act as mediators and perform intervention in solving daily social problems. Being even stronger advocate of the ideas of critical paradigm, Denzin (2002) argues that clients of social workers become the products of structural problems of neoliberal politics and consumer capitalism.

Social worker must work with a client under the principle of partnership, meaning that recipients of social services should be involved into decision making process as active citizens when such decisions are related to their personal lives (Healy, 2005; according to Dalrymple, Burke, 1955). Social work with families at social risk must be performed by constantly stressing the importance of values and social justice, and not blaming clients for their difficulties, meanwhile social workers, on the opposite, are encouraged to apply multidimensional analysis that involves the dimensions of personal, cultural and structural oppression experienced by the family (Healy, 2005).

Dahrendorf (1996) talks about marginal class constructed of main characteristic features, namely, weak connections with labour market, children whose parents are not married, drug or psychotropic substance abuse, prolonged dependence on social support and criminal activity, usually demonstrated by men. Other authors state that targeted problems of families at social risk are neglect, lack of care, alcohol abuse, prostitution, crime, drug abuse, depression, psychosis and other problems (Matos, Sousa, 2004). Emergence of such families as social constructs is linked by Dahrendorf (1996) to

unequal distribution of life opportunities. Such distribution is the result of power structures, where there are those with the power to create laws and to evaluate situations of separate groups of society on the basis of these laws. The only solution is seen as minimization of unequal distribution.

Subjective experiences of families at social risk are socially constructed by the participants of the system of social services through mutual interaction. Family at social risk in social work practice can be viewed as a social construct that, in turn, causes certain conflict between different groups of society. Therefore, the study presented in this article is based on constructivist perspective among others.

The main idea in social constructionism is that the “reality” which people ascribe to “worlds” is constructed (Naujaniene, 2007). Social constructionism raises numerous topics that have emerged during the development of constructive social work. Constructionism requires developing a critical position taking into consideration our own interpretations of world view. It is comprehended that social world is the product of social processes that reveals that nothing is naturally given or determined by the nature. Moreover, social categories and concepts created by us are different from the ones created by others when viewed from historical and cultural perspectives in specific contexts and cannot be judged as being more true than others or vice versa. According to Burr (1995, 3-5), what is considered “truth” is a product of the social processes and interactions in which people are constantly engaged with each other.

Knowledge about the world is developed during daily spoken interaction between people (Parton, 2003). From the perspective of social constructionism, things are subjective in that sense that they “are always already imbedded in the language used to refer to them (Gubrium, Holstein 1999, 289). Language is one interaction and it is actually the main kind through which people construct what it is considered “truth” at any given moment. Language orders people’s perceptions and makes things happen. Even more, language or social texts actively construct a version of objects, events and categories existing in the social world (Potter, Wetherell, 1987). As such

professional experience could be disclosed by the effect of language and other symbolic forms (Layder, 1994, 87). Additionally, the way people use language can be thought of as a form of action (Burr 1995, 7). In that sense language along with other kind of interactions between people are considered practices through which people share their versions of knowledge about the world and construct "reality". Moreover language is seen as not only constructing "reality" but, with an emphasis on the rhetorical form of language, actively changing it (Parton, 2003, 6).

According to Parton (2003), emphasis on reflection lies at the core of constructionism as an attempt to rephrase someone's thoughts and turn them into a question by watching the constructs of alternative topic and perception of experience appear. Reflectivity in social work implies the necessity of dialogue between a social worker and a client. A social worker as a professional must develop family's activity by purposefully guiding it into certain direction. Social worker must also raise consciousness of the families and their ability to express their experiences by arguments rising from their life experiences. It means that the social worker should seek that the family at risk becomes active, because only active people are able to overcome difficulties rising in social environment, find the reasons to the problems and resources to solve the problems (Motiečienė, 2010).

According to social constructionism, meanings of experience are constructed in a context and are variable phenomena that develop from interaction between the participants. Client's resistance means his wish to control his life (Motiečienė, 2010) or the fact that the social worker has intervened too much or in a wrong way (Naujanienė, 2007a). Meanwhile, rhetoric of social workers about a client's resistance ascribes the client to the category of 'bad' clients and blocks social worker's ability to reflect, which usually ends with failure to find common language with the recipient of the services (Naujanienė, 2007a).

Family is socially constructed but may manifest itself in a multitude of forms. According to Dominelli (2004), new forms of family contribute to family stigmatization and labelling, among others, into 'good' or 'bad' families. She disapproves of such categorization by

arguing that not all parents possess equal resources to raise children (Dominneli, 2004). Yet, people to whom social workers provide services are actually positioned by categorization and stereotyping. From a social constructionism perspective, categorization and stereotyping could be considered as social practices which are rhetorically externalized by words, by the naming of “client” as well as the meaning the name carries. Categorization has manifested as much in social work theory as in actual practice. Different social work theories, such as the psychoanalytical or behaviorist approaches or radical social work, produce a multiplicity about how the client has been a focus in social work research (Juhila, et al. 2003, 12-13; in Naujaniene, 2007). Based on the ideas of Gubrium and Holstein (2003, 6), categorization is necessary as a way to understand the multi-faceted experiences of people. Categories allow a familiarization with specific details that are characteristic of one or another matter (Naujaniene, 2007).

The aim of the article is to present the study with the intention to reveal how positioning of “risk family” woman through conversation with social worker and mother about social work process with family deploys different categories of motherhood. Experience of the recipient of social services is chosen to be viewed as episodic. This article addresses the way a woman’s category of “mother” is created through the language of participants of social work process as they reflect the experience of recipience and provision of the services and what positions and actions are related to such categories. This also allows revealing how the rhetoric of a social worker as he/she describes a “mother” positions the social worker as a professional and what consequences it has on social work practice.

RESEARCH METHODOLOGY

This article presents the analysis which is a part to a more extensive study carried out under participatory action research methodology. During the research, both the researcher and the interviewees, i.e. social workers and families at risk, were involved in the process of

critical reflection on the experience of provision and recipience of the services. The research was based on the premise that a phenomenon was understood through reflection, a necessary element of the participatory action research. According to Kidd, Krat (2005), participatory action research can be explained both theoretically, and practically as a research involving participation (being a part of something that is shared) and action (disclosure of change and making it practically applicable). The research was carried out at one of the major Lithuanian cities, at the places chosen by the interviewees through March and April 2010. Interviews with social workers were held at the places offered by them: at social workers' homes, one interview was held at a researcher's workplace, other interviews took place at social workers' workplaces. Families participating in the research invited the researcher to their homes, and interviews were held in home settings. Data analysis covered records about a certain family at risk from the family's "case" and a transcript of the research interview recorded on a voice recorder. Voice recorder was used to collect the data.

The article provides analysis of the interviews with one social worker who worked with a family at social risk and with the mother of the family. A single-parent family with the mother as the head of the family was chosen for the analysis. Another criterion was the stage of the process with the family based on the premise that the beginning of process defines the progress of further work. By using the method of open coding (Glasser, Straus, 1967), categories to which the interviewees ascribe different meanings were identified. In this study these were the categories of 'good' mother and 'bad' mother with the intention to demonstrate practical implications of such categorization and how this leads to encouragement of changes in clients' lives for the theoretically acknowledged aim of social work practice – to empower clients to be personally responsible for their lives. Another aim was to critically review the process of the participatory action research that presumably empowers the interviewees through "raising of consciousness". Interviews with the interviewees are considered to be social constructs that emerge from interaction between the researcher and the interviewees. For this study the research interviews were based on the 'active interviewing' concept

(Holstein, Gubrium 1997, 113-114). This concept means that interview is not viewed in the conventional manner, which presumes that, if the interviewer asks questions properly, the interviewee will provide the desired information. Participation in an interview involves work that makes meaning, that the interviewee is seen as producing knowledge together with interviewer (Naujaniene, 2007). Text interpretation by the researchers is provided along with the speeches of interviewees *in vivo*, in order to maintain direct connection with thoughts expressed by the interviewees. Speeches of interviewees are provided in quotation marks in the text of interpretation, and in italics if presented as separate paragraphs.

RESULTS OF THE RESEARCH: SOCIAL CONSTRUCTION OF 'GOOD' AND 'BAD' MOTHERHOOD

Analysis of the interviews has revealed that both the social worker and the "risky family" mother sought for the researcher's understanding during conversations with the researcher. The former wanted the researcher to understand why she provided the services to that family. The mother, in turn, wanted the researcher to understand why she became the recipient of the services. However, in order to reach their aims, the interviewees used different rhetoric. We first provide the analysis of the interview with the social worker and use additional records from the "family case" to reveal insights that stimulate change in social work practice. The second part of the analysis is dedicated to the analysis of the researcher's interview with the mother.

In her narration about inclusion of the family into the list of service recipients, the social worker was rather explicit and named the children rights protection specialist under whose instruction she had included the family in the list:

They told me there was a family whose need for services had not been identified yet. You have to assess and identify this family's need for social services [from the interview with the social worker].

The expression “this family” without any specification allows assuming that giving bold instructions to assess this family without any further explanations to social workers is a usual practice of the children rights protection specialist. The social worker has not received any explanations why the family has been assigned to the social worker for work with families at social risk, which becomes clear from further conversation as the social worker tries to make a guess that “maybe because they want to see how it all goes”, because the family has been participating in the social support system for some time:

She used to live in a charity home and the family received child support for school. The support has been suspended. <...> I must see the family's situation, as they have been receiving the support for a long time, there must be a break as others also need money. This is why it is necessary to find out if this is not going to affect the children, if the mother will be able to support the children on her own and take care of their material well-being [from the interview with the social worker].

Thus, the family received child support for school, but now, as “others also need money”, the support has been suspended. The support has been suspended not because the family's financial situation has improved, but just because “they have been receiving the support for a long time, there must be a break”. There is no further elaboration on what “a long time” should mean, though later conversations with the mother reveal that it is the period of two years. So the social worker is involved into provision of aid as a monitor and is supposed to identify whether the mother “will be able to support the children on her own and take care of their material well-being” in the event that the family's financial situation becomes worse [from the case files].

In general, having looked at the history of inclusion of this family into the social service system, one might notice that the family has become the recipient of the services after suspension of its social support. Further analysis of the interview reveals that the support has been reduced, not suspended. Nevertheless, in this case the

support enabling the family to manage on its own has been replaced with the services intended for mere “monitoring” of whether the family will survive.

The social worker’s duty is to monitor “until the situation about the suspicions is clear” [from the case files]. This monitoring task involves the social worker’s visits to the family and communication with the mother and children, as there is no man/father in the family. What happens during this communication? Analysis of interview with the social worker reveals social construction of mothering during the process of “monitoring”. This construction creates two opposite categories of mother with opposite meanings. The first category is a ‘good’ mother. What meanings construct the category of a ‘good’ mother in the social worker’s language and records of the family’s case? ‘Good’ mother is, first of all, caring:

The mother takes care of her daughter, dresses her neatly, takes to and from kindergarten on time [from the case files, kindergarten teacher’s narrative].

I have been informed by the kindergarten that the girl is active, dressed in clean clothes, no problems have been identified [from the interview with the social worker].

Social worker’s expectations were satisfied as the ‘good’ mother “was filling up an application for a scouting club” [from the interview with the social worker]. ‘Good’ mother listens and doesn’t object to what the social worker says to her. Social worker instructs the mother what a ‘good’ mother must do:

Take the children to see their therapist for disease prevention and treatment, for vaccination. I asked her to pay more attention to her son, to attend parent meetings and take interest in the child’s extracurricular activity [from the interview with the social worker].

‘Good’ mother has seemed to be “quite normal” to the social worker. Being normal is understood as the mother’s “talkativeness” and openness, when mother “hides nothing” and is willing to share with the social worker her concern about her 12-year-old son’s behaviour.

'Good' mother's household is neat and, according to the social worker, "conditions at home are perfect, there is not a single doubt about it" [from the interview with the social worker].

'Good' mother knows how to keep balance between work and caring for children, because "she works part-time at a kebab stall and is registered at the Job centre, she is practically at home all the time" [from the interview with the social worker]. Social worker does not question how the family manages to survive when mother is "practically at home all the time". Maybe it is so because 'good' mother "knows the system, knows how to receive social support, whom to address" [from the interview with the social worker]. And this is identified as family "independence".

'Good' mother is also constructed as the one who obeys social worker's instructions, or as the social worker puts it, "she is inclined to communicate":

She accepts what you say to her and is willing to do everything; we'll see what happens in future [from the interview with the social worker].

Nevertheless, the last phrase reveals that though the mother and her family is 'good', certain suspicion remains and she is not trusted. Social worker's role as one of the "monitor" is related to monitoring of the mother, and the category of 'bad' mother is being created during the process of monitoring as well. Construction of a 'bad' client is an important object of research on social work (Naujanienė, 2007). This category is defined as clienthood, "when the client does not behave like a 'good' client should" (Juhila, 2003, 86).

It is the category of 'bad' mother that justifies "monitoring" function of the social worker. According to Žalimienė (2006), "social worker or social service provider provides the services that help their clients live without these services, forget about the providers and start planning, organizing personal lives and acting in the social environment on their own". This approach implies that social worker should direct his/her efforts towards making a 'good' mother stronger rather than monitoring a 'bad' mother. Still, in her attempt to justify the need

for *her* work with the family (not the needs of the family), the social worker uses her professional rhetoric to create the image of a 'bad' mother.

The first element is alcohol. Social risk families are usually associated with alcohol consumption. It is therefore not a coincidence that in this study as well the construct of a 'bad' mother was primarily related to alcohol consumption. The social worker said:

I go there one day and I see a friend, a bottle of champagne on the table, and it is 3 p.m. yet. I think that during the day the child might see it <...> when I go there another day, I see a bottle of bear on the kitchen table [from the interview with the social worker].

The social worker was outraged because "the child might see" those bottles. She registers the fact of the bottle and the fact that it was daytime. Moreover, the mother is 'bad' because a friend has visited her, and there is a bottle of champagne on the table, which leads to a conclusion that both of them have been drinking the champagne. By specifying the time of the day "3 p.m." she seems to emphasize the bad nature of the action and to imply that another time of the day may have been more adequate. Another fact that creates the image of 'bad' mother is the bottle of bear on the kitchen table. These "bottles" prompted the social worker to "visit and monitor them more often". Moreover, the social worker found the "mother's" appearance "suspicious".

The mother raises children alone, so the social worker does not say anything about a husband or a partner. But there are the children, and a 'bad' mother must have a 'bad' child. The story of a 'bad child' is created with the help of the school social worker. What does a 'bad' child do? A 'bad' child "mingles with children from the neighbourhood who do all sorts of things". The social worker does not care to explain what "do" and "all sorts of things" mean. The child's age and the fact that teenagers need to communicate with their peers are also not mentioned. There is just a professional diagnosis that the 'bad' child shows "problematic behaviour". And, according to the social worker, "mingling" with children from the neighbourhood is

the problematic behaviour. Moreover, the 'bad' child "goes to the mall after school to just hang around and doesn't go home". This is also ascribed to problematic behaviour. Problematic behaviour becomes worse as the 'bad' child states that he doesn't want to attend a scouting club".

When I came, the mother was filling up the application for a scouting club, when I came the other day and saw the child, I asked him if he liked it and he said he didn't and wasn't going there anymore. [from the interview with the social worker].

During the interview, the social worker did not emphasise that the child had his opinion and was able to clearly express his wishes. On the contrary, refusal to attend the scouting club becomes associated with "problematic behaviour". Thinking in "diagnoses" is also present in the conversation about the girl who goes to the kindergarten and is described by her teacher as "open, sincere. She likes being in smaller groups of friends and is less open in the whole group activities" [from the case files]. In the narrative of the social worker this girl is constructed as "having certain problems", "sometimes asking inadequate questions" and the social worker starts talking in "diagnoses" viewing the girl as the representative of the girls from homogeneous risk families who "talk like adults" rather than a unique personality. This is presented as something bad, though during the same section of the interview the social worker seems to contradict herself and reproaches the mother for "being too kind to the children, not disciplining them and spoiling them". So the 'bad' mother doesn't know how to set limits and spoils her children, "And the consequences are already here". Again the social worker fails to explain what the consequences are by supposing that the consequences are ordinary and do not differ from the ones in other families at risk.

I suspect the children grow without any limits, maybe being too good to her children the mother does not discipline them and spoils them. And the consequences are already here [from the interview with the social worker].

Thus, the bottles of light alcohol at the wrong time of the day as the social worker puts it and mother's "suspicious" appearance are the factors that determine the need for a social worker to intervene into the life of this family, and this is the way a position of 'bad' mother is constructed. Moreover, 'bad' mother has 'bad' children, the son's behaviour is just "problematic" and the girl "has certain problems". Furthermore, according to the social worker, "the child needs to visit a psychologist regarding her behaviour", and she agrees with the mother that the social worker will arrange the visit and the mother will take the child to the psychologist.

Analysis of the interview with the social worker has revealed that the narrative of the social worker is not quite specific about the family and is full of professional "clichés/diagnoses". When talking in "diagnoses", the object is not the mother but a 'bad' mother that is always there in "those" families. There is no referral to uniqueness of a client's situation, client's personality emphasised by the social work theory in the rhetoric of the professional.

The woman is included into the system of support without any clear motives, just because her family is "suspicious". And it is exactly at this point when everything, even the woman's close connections with her father, becomes her weakness rather than strength and leads to making conclusions that she wouldn't be able to live on her own "if not for her father". The woman's life has to be the way the social worker thinks it should be, and the social worker clearly takes the position of a controller. According to the social worker, the woman cannot go to her friends' during the day – such action is treated as not taking care of her 12-year-old son.

The child comes home from school, she goes to her friends' and the boy is left free, she doesn't take care of him and we have to clear up the situation [from the interview with the social worker].

Besides acting as a controller and a monitor, the social worker acts as a detective because she has to "monitor and watch – maybe the problems hide somewhere else", because the client is a 'good' mother who "receives social support, has applied for monetary child support,

has completed mother skill training. She has also taken care of food aid packages". Thus, she is a 'good' mother, but still something is "suspicious" and 'bad' mother is constructed to justify social worker's supervision, control and suspicions.

Rhetoric of another interviewee – the mother – was quite different during her conversation with the researcher. The mother has started with her family's life story. The story has revealed that the mother and children suffered from her husband's neglect, alcohol abuse and violence. She tried to make her husband move away from their apartment through the Court. The process was complicated and lasted for a very long time, so she decided to move to the crisis centre.

I took the documents, all necessary things, daughter and son, some clothes and we left. I was looking for a place to stay and then moved to a crisis centre, a charity home. <...> lived there for about two years, the Court made a decision to move him out. I submitted the documents for children maintenance [from the interview with the mother].

The woman's story was hard and yet heroic as she had overcome a lot of hardship until she could live with her children at her home. Woman's active behaviour can also be noticed in her narrative about her home that she had to clean up after her husband:

Everything was broken, destroyed, there was no furniture, no repair works, no doors, everything looked awful, only frames were left of the gas stove, refrigerator – all the metal parts had been sold [from the interview with the mother].

From the mother's narrative it becomes clear that it was not the first time she encountered with social workers and received support from them. Her husband has been aggressive and had been using violence against the woman when under alcohol influence. In order to protect her children from such an environment, the mother used to take the children to the charity home, where a social worker once noticed violence marks on the woman's face. This was her first encounter with a social worker:

<...> I couldn't do anything, he used violence, police came, he said he was registered there and that was it. I moved to the charity home because I knew there was such a home. My goddaughter and my son used to attend day centre there. Once, when I took my son there <...>a social worker noticed that I had changed, lost weight and had a bruise [from the interview with the mother].

When talking about her children, she says usual things about them. In her narrative, she positions herself as a good and loving mother:

Yes, you are the one who suffers, but your children see it. This is the worst. When he starts cursing, the children hear it. When I saw my son repeating his father, I got really scared. He was playing with my godson and said: "Now I will come home drunk...", and he started replaying what he saw at home. I noticed that and I got scared. The games were what he saw around him [from the interview with the mother].

The interview with the mother has revealed that the mother managed to agree with the son about the scouting club and he likes attending it. Yet, he refused to go to the day centre arranged by the social worker.

He told the social worker he attended the scouting club and was not going to go to the Old Town [from the interview with the mother].

The mother also related involvement of the social worker for work with families at risk to the suspension of child support. Family income is very low (the figure of less than 600 litas was named), but the support still has been suspended and the woman has not objected and even accepted the suspension:

They had been giving me the support for quite some time, somewhat 2 years, and then the inspector said that other families also needed support. I said that they did what they could, other families might be in worse situation, so this was right. I received the money in February for the last time and then the social worker arrived. She told me she got a letter instructing her to monitor if the family needed support. She asked if we had no objections to her visiting us [from the interview with the mother].

When talking about recipients of the services, the mother was not inclined to think these were necessary. Still, her previous experience with social workers seemed to have guided her to accept the support. The mother is concerned about her son's behaviour and sees the helping hand in the social worker who could help her with her son. She did not name neither monitoring, nor control in her speech about the services. She associated the services with the meaning of information. When talking about the services, the woman stated that:

there's no need for these services, as I know quite well where to go, what to do when your income is lower than 525 to receive food aid packages. I have already taken care of the EU funded support for food products, heating and hot water, so for the moment I have the experience of it and I know everything.

Independence and activity were very clear in the woman's speech. During the interview, the woman even told us that she could consult other families who faced the same difficulties as she had. When talking about herself, the woman constructed her image as the one of a 'good' mother. 'Good' mother is independent, active, understanding and focused for her children. She remained on a heroic note when describing her financial situation:

Well, maybe it's harder now to cope with the finances, but it is possible to live when you have arranged all the allowances. I can even take the children out to have pizza time to time, if I save for it the other day. I don't want my children to not be able to say they have been somewhere, children share about the places they have been to, and I want my children to see things [from the interview with the mother].

Interestingly, support is reduced as others also need support, though the family is very close to the poverty level. As the support has reduced, they are prescribed with "social monitoring" to identify the family's need for the services. However, the interview with the woman has revealed that she doesn't need any services, and her problem is the finances. So the family needs support instead of which they receive the services. In other words, financial capabilities are limited to see how the family going to survive.

FOR CONCLUSIONS

The social worker and the woman who is the “risky family” mother have demonstrated different narrative discourses about their experiences of the system by critically reflecting their experience of provision and receipt of the services. The social worker has introduced the client into the service system and plans further strategy of support, thus emphasizing disadvantages of the recipient of the services and expressing distrust in the client’s resources. Social worker’s rhetoric that constructs the position of a ‘bad’ mother is dominated by the discourse of negative attitude towards families at social risk that prevails in the society, when these families are viewed as a homogeneous group with typical personal problems: incapability to take care of own children, risky personal behaviour, including alcohol consumption. Such structural problems as unemployment, poverty, imperfections of legal and social protection systems etc. have not been identified in the social worker’s rhetoric. Social worker ascribes only the meanings of obedience and compliance with the social worker’s instructions to the position of a ‘good’ mother, thus expressing paternalist nature of social work. This leads to self-establishment of the social worker as a controller and a monitor. Empowerment of the client, encouragement of development for client’s strengths, psychosocial advice to the client is not present in the rhetoric of the interviewed social worker.

Rhetoric of the interviewed mother discloses the position of a ‘good’ mother and does not contain any prevailing paternalistic obedience. ‘Good’ mother is active, she understands the system of social security, questions the necessity of the services and sees the causes of her problems in the existing structures of the system: unemployment, poverty. Still, a ‘good’ mother with good experience of participation in the system of social security is able to find sense in the services provided to her and identifies the necessity of psychosocial advice to her as to a single parent. ‘Good’ mother ascribes meaning to the social worker positions as of the informer and mediator between the client and other specialists. The mother does not identify the need for social worker as a monitor and controller.

PRACTICAL IMPLICATIONS

Social work with families at social risk is one of the most complex areas of social work in Lithuania demanding that social workers demonstrate both critical thinking and knowledge of specific micro level interventions. Analysis of the case presented in the article has revealed that it is necessary that social workers are given an area for professional improvement, where the way of thinking dominated by the prevailing discourse could be externalized, discussed, and strategies of actions to empower the client could be planned.

Case analysis has also prompted several simple recommendations to practitioners. First of all, even if instructions to start work with a family have been given, a social worker must start his/her work with respectful attitude and listen to the client's needs rather than the order by the children rights protection specialist. Social worker must ask the family about the services they need and about any proposals the family might have from their perspective of service recipients. By establishing a dialogue based on cooperation and trust, a social worker must aim at minimizing family's disadvantages and maximising available recourses or strong sides. Power implied by the social worker's position must be exercised through social worker's professional ability to build cooperative relations that empower the client to change, rather than through control and monitoring.

RÉSUMÉ

CONSTRUCTION SOCIALE DE LA « MAUVAISE »
ET DE LA « BONNE » MÈRE À L'ISSUE DE L'ÉTUDE
DE RÉFLEXION CRITIQUE SUR LES EXPÉRIENCES
EN TRAVAIL SOCIAL AVEC DES CATÉGORIES
DE FAMILLE À RISQUE

La Lituanie comptait en 2010 10904 familles à risque social pour un total de 23335 enfants. Le terme de famille « à risque » est associé en Lituanie à celui de famille à « problèmes multiples » utilisé dans la littérature et la pratique en travail social. L'article est basé sur des paradigmes critiques et constructivistes. Le point de vue défendu dans l'article est celui qui voit dans la famille « à risque » une construction sociale issue de la pratique

en travail social qui, en retour crée des conflits entre différents groupes sociaux. Le but de l'étude est de révéler comment la femme d'une « famille à risque » par ses entretiens avec l'intervenant social et la mère sur le processus de travail social avec la famille, déploie différentes approches de la maternité. L'article propose l'analyse d'une étude de cas faisant partie d'une étude beaucoup plus vaste, élaborée selon une méthodologie de recherche action participative. Il s'agit de l'analyse de l'entretien d'une intervenante sociale travaillant avec une famille à risque avec la mère de cette même famille. Au cours de cette recherche ont été élaborées les catégories de « bonnes » et « mauvaises » mères. La travailleuse sociale et la mère issue d'une catégorie de famille à risque après une réflexion critique sur les services rendus et reçus ont fait état de différents discours narratifs sur leurs expériences concrètes du système. La rhétorique de la travailleuse sociale présidant à la position de la « mauvaise » mère est dominée par le point de vue négatif qui prévaut dans la société quant au discours sur les catégories de familles à risque social, vues comme un groupe homogène ayant ses problèmes personnels typiques, alors que la nature structurelle des problèmes est ignorée. La rhétorique de la mère participant à la recherche révèle la position de la « bonne » mère qui est une femme active qui comprend le système de sécurité sociale, qui s'interroge sur la nécessité des services et voit les raisons de ses problèmes dans les imperfections des structures existantes.

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